

**Travel & Expense Account
Transmittal Sheet**

After Approval, Mail Receipts To

CDPH, Accounting Section
MS 1601, PO Box 997376
Sacramento, CA 95899-7376



Employee Name	<u>Horton, Mark</u>
Expense Dates	<u>01/25/10-02/24/10</u>
Total Expense Amount	<u>1191.15</u>
Amount Due Employee	<u>180.95</u>
Form ID	<u>TEA000681410</u>

DIRECTIONS FOR SUBMISSION

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

	Date	Expense Item	Amount	If not submitted - Explain
1)	01/25	Taxi Fare	17.95	
2)	01/29	Taxi Fare	10.00	
3)	02/24	Taxi Fare	44.00	
4)	02/24	Shuttle Fare	5.50	
5)	02/24	Taxi Fare	50.00	
6)	02/24	Shuttle Fare	5.50	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved
by: _____